As these disorders are hereditary in nature and there is no cure for them disgnostic facilities for Sickle Cell Disorder and other genetic defects, carrying out population genetic survey to detect carriers and sufferers, providing health education, genetic counseling, marriage counseling and pre-natal diagnosis wherever required are provided.

The facility for diagnosis of these disorders have been established at Mumbai, Vadodara, Dibrugarh, Kolkata, Ludhiana, Bangalore, Nagpur, Surat, Bhubaneswar and Coimbatore.

Enhancing of health budget

3268. SHRI PENUMALLI MADHU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the UPA Government assured the people in its Common Minimum Programme that health budget would be enhanced for 2 to 3 times;

(b) whether it is also a fact that the health is decreasing gradually in our country and leading to spread of viral disease like Malaria, Chikungunya, Dengue etc.;

(c) if so, the details thereof; and

(d) the steps taken by Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Yes Sir. The National Common Minimum Programme (NCMP) mandates that the public spending on health sector will be increased to atleast 2-3% of GDP over the next five years.

(b) to (d) No Sir. Vector-borne diseases like Malaria, Chikungunya & Dengue are seasonal and epidemic-prone diseases.

A comprehensive National Vector Borne Disease Control Programme (NVBDCP) is under implementation throughout the country for prevention and control of vector-borne diseases namely Malaria, Filaria, Kala-azar, Japanese Encephalitis (JE), Dengue and Chikungunya. The strategies followed under NVBDCP are:

(i) **Disease Management Strategy:** includes early case detection and complete treatment, strengthening of referral services, epidemic preparedness and rapid response.

(ii) **Integrated Vector Management Strategy:** (For Transmission Risk Reduction) includes indoor Residual Spraying in selected high risk areas, use of insecticide treated bed nets, use of Larvivorous fish, anti larval measures in urban areas including bio-larvicides and minor environmental engineering.

(iii) **Strategy for Supportive Interventions:** includes Behaviour Change Communication, Public Private Partnership and inter-sectoral convergence, Human Resource Development through capacity building, Operational research including studies on drug resistance, Monitoring and evaluation through periodic reviews/ field visits and web based Management Information System.

Adverse effects of distribution of condoms to minor children

†3269. SHRI SHREEGOPAL VYAS:
SHRI VINAY KATIYAR:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Britain and France have failed in controlling HIV and AIDS while the distribution of condoms to minor children has resulted in an increase of minor mothers;

(b) whether Government are making any efforts regarding need of a discussion and to bring awareness on the said issues in view of such incidents; and

(c) if not the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) No, Sir. The prevalence of HIV in Britain and France is comparatively lower than East European countries. Overall, the national AIDS control programme in Britain and France played a key role in keeping the HIV prevalence under control.

†Original notice of the question was received in Hindi.